## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE rEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by 0, specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

5514 7590 08/22/2007

APPLN. TYPE

FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112

SMALL ENTITY

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Malling or Transmission

I hereby certify that his Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being fassimile
transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name) (Sie (Date

DATE DUE

| ı | APPLICATION NO.     | FILING DATE         | FIRST NAMED INVENTOR                     | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|---------------------|---------------------|--|---------------------|------------------|
|   | 10/630,767          | 07/31/2003          | Ikuo Watanabe                            | 03500.014019.1      | 8460             |
|   | TITLE OF INVENTION: | INFORMATION PROCESS | INC METHOD INCORMATION PROCESSING APPARA | THE INDODMATION DOO | CECCING          |

SYSTEM, MULTIMEDIA PRESENTATION SYSTEM, FILE UPDATE METHOD, MULTIMEDIA PRESENTATION METHOD, AND STORAGE MEDIUM

|  | L         | 1        |   |   |          |   |  |
|--|-----------|----------|---|---|----------|---|--|
| nonprovisional   | NO        | \$1400   | \$300   | \$0   | \$1700   | 11/23/2007                              |  |
| EXA  | MINER     | ART UNIT | CLASS-SUBCLASS  | 1   |          |   |  |
| MIZRAH   | , DIANE D | 2165     | 707-203000  |   |          |   |  |
| I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.853).  Change of correspondence address (or Change of Correspondence Address form FI/OSB#12) attached.  "Fee Address" indication of "Pee Address" Indication form FI/OSB#2; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |           |          | or agents OR, alternative<br>(2) the name of a single<br>registered attorney or a | 3 registered patent attorn<br>wely,<br>e firm (having as a memb<br>agent) and the names of u<br>meys or agents. If no nam | Harper & | Fitzpatrick, Cella, Harper & Scinto 2 3 |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  |           |          |   |   |          |   |  |

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE

Canon Kabushiki Kaisha Tokyo, Japan

ISSUE FEE DUE

| Please check the appropriate assignee category or categories (will | not be printed on the patent): | ☐ Individual | Corporation or other private group entity   | Government |
|--|--------------------------------|--------------|---|------------|
| 4a. The following fee(s) are submitted:                            | 4b. Payment of Fee(s): (       |              | pply any previously paid issue fee shown ab | ove)       |

XX Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3939 (enclose an extra copy of this form). Advance Order - # of Copies five (5)

5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature / John A. Krause/ September 20,2007 John A. Krause 24,613 Typed or printed name Registration No.

This collection of information is required by 73 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very 1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very 1.4. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and will very 1.4. The complete application form to the USPTO. Time will very 1.4. This formation of Confidence, 12.5. The confidence is a complete application of the USPTO. The value of the use of the USPTO. The value of the use of t

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.